CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT	FORM C/OH COVER SHEET PG 1					
The C/OH Instruction Guide explains how to complete this form. 1 Filer ID	2 Total pages filed: 13					
3 CANDIDATE / MS / MRS / MR FIRST MI Robert	Date Rechibiliane City Secretary					
NICKNAME LAST SUFFIX Briley	JUL 1 7 2017 Filed for Record					
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE PO Box 6638	Date Hand-delivered of Destmarked Receipt # Amount					
Change of Address Abilene, TX 79608-6638	Date Processed Date Imaged					
5 CAMPAIGN MS / MRS / MR FIRST MI TREASURER Mark W						
NICKNAME LAST SUFFIX Hudson						
6 CAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; 3102 S. Clack, Ste 1 Abillene, TX 79606	STATE; ZIP CODE					
7 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION TREASURER 325 698-4861						
8 REPORT TYPE January 15 January 15 30th day before election Runoff X July 15 8th day before election Exceeded \$500 limit X	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)					
9 PERIOD COVERED Month Day Year Month Day THROUGH Month Day 06/30/201	Year 7					
10 ELECTION DATE Month Day Year 06/17/2017 ELECTION TYPE X Runoff General Special	Other					
11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT Mayor, City of Ab	•					
GO TO PAGE 2						
Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.0.2645						

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH

SUPPORT	& TOTALS	COVE	2 of 13	
13 C / OH NAME	Briley, Robert		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	ures made by political co the candidate's or office n only if they receive not	mmittees to support the holder's knowledge or ice of such expenditures.	
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME		
	SPECIFIC	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
6		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		I AL CONTRIBUTIONS OF \$50 OR LESS (OTHER T ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$ 20.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 52,407.74
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS	ITEMIZED	\$ 0.00
	4. TOTAL POLITIC	CAL EXPENDITURES		\$ 70,720.61
CONTRIBUTION BALANCE	5. TOTAL POLITIC	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	OF THE LAST DAY	\$ 0.00	
17 AFFADAVIT	BERTA A. FERNANDEZ Notary Public, State of Texas My Commission Exp 05-06-10	Stat O.		be reported by me
Sworn to and subset of July	cribed before me, by the s, 20/, to co	Relief 10 6-1	, this the	day day
	****		ii ii	

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 13 **18 FILER NAME** 19 Filer ID Briley, Robert 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 52,407.74 \$ 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS 3. \$ 4. X SCHEDULE E: LOANS 262.26 S 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 69,888.34 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. 832.27 10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ Version V1.0.2645 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/2 Rpt: 4/13 2 FILER NAME 3 Filer ID Briley, Robert 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 06/14/2017 Briley, Robert O. \$50,737.74 6 Contributor address; City; State; Zip Code 51 Fairway Oaks Blvd. Abilene, TX 79606 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/12/2017 Broyles, Tommy \$100.00 Contributor address; City; State; Zip Code 2250 Old Orchard Rd. Abilene, TX 79605 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (iD#:_ Amount of Contribution (\$) 06/20/2017 Hallmark, Jerry \$250.00 Contributor address; City; State; Zip Code 1110 Iberis Road So. Tuscola, TX 79562 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 06/19/2017 \$100.00 Mathur, Mishi & Sandip Contributor address; City; State; Zip Code 49 Glen Abbey Abilene, TX 79606 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Full name of contributor out-of-state PAC (ID#:__ Amount of Contribution (\$) 06/12/2017 Sivley D.D.S, Mark & Judy \$100.00 Contributor address; City; State; Zip Code 1234 Elmwood Abilene, TX 79605 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 5/13 2 FILER NAME 3 Filer ID Briley, Robert 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 06/14/2017 Trotter, B.B. (Dr.) \$100.00 6 Contributor address; City; State; Zip Code 6570 Lincolnshire Way Abilene, TX 79606 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) ut-of-state PAC (ID#:_ 06/19/2017 Varghese, Joji \$1,000.00 Contributor address; City; State; Zip Code 5261 Willow Wood Dr. Abilene, TX 79606 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.0.2645

LOANS				SCHEDULE E			
The Instruction	ges Schedule E: 1 Rpt: 6/13						
2 FILER NAME Briley, Robert			3 Filer ID				
4 TOTAL OF UN	IITEMIZED LOANS			\$			
5 Date of loan 06/14/2017	7 Name of lender out-of-state l	PAC (ID#:)	9 Loan Amount (\$) \$262.26			
6 Is lender a financial institution?	8 Lender address; City; State; 51 Fairway Oaks Blvd	Zīp Code		10 Interest Rate			
No	Abilene, TX 79606			11 Maturity Date			
12 Principal occupation	on / Job title (See Instructions)	13 Employer (See Instruction	ıs)				
14 Description of Coll X None	ateral	15 Check if personal funds w	ere deposited	l into political account (See Instructions)			
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)			
X not applicable	18 Guarantor address; City; State;	Zip Code					
20 Principal occupation	on	21 Employer (See Instructions)					
17							
		,					
				4			
				227			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

ᆫ					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Politica/ Committee Credit Card Payment					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID			
	Sch: 1/5 Rpt: 7/13	Briley, Robert			
4	Date	5 Payee name			
ľ	06/19/2017	Allen, Jace			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$135.00	1185 China St			
		Abilene, TX 79602			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Salaries/Wages/Contract Labor			
		Content to how a signal			
		Contract labor - signs			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	06/19/2017	Ayers, Jeremy			
П	Amount (\$)	Payee address; City; State; Zip Code			
\$135.00 202 Quicksilver					
		Abilene, TX 79602			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Salaries/Wages/Contract Labor			
		Contract labor - signs			
		Contract labor - Signs			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	06/19/2017	Bilbrey, Michael			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$90.00	1510 Saddle Lakes			
		Abilene, TX 79602			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Contract labor - signs			
		a a i i i aa a taa a a a a a a a a a a a			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OF				
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POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Contribution Expense Contribution Diseases Made By Contribution Expense Contribution Diseases Made By Contribution Expense Contribution Expense Contribution Diseases Made By Contribution Expense Contribution Contributio						
Sch: 2/5 Rpt: 8/13 Sriley, Robert 4	Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee		Event Expense Loan Repayment/Reimbursement Solicitation/Fundralsing Expense Fees Office Overhead/Rental Expense Food/Beverage Expense Git/Awards/Memorials Expense I Committee Legal Services Salaries/Wages/Contract Labor Loan Repayment/Reimbursement Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
Sch: 2/5 Rpt: 8/13 Briley, Robert 4	1	Total nages Schedule E1:	2 FILER NAME 3 Giler ID	_		
Bilbrey, Randy Amount (\$) 7 Payee address; City; State; Zip Code \$125.00 1510 Saddie Lakes Abilene, TX 79602 8 PURPOSE OF Salaries/Wages/Contract Labor Salaries/Wages/Contract Labor Office sought Office held Purpose OF Salaries/Wages/Contract Labor Office sought Office held Payee name Briley, Robert Amount (\$) Payee address; City; State; Zip Code \$262.26 51 Fairway Oaks Blvd Abilene, TX 79608 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Loan Repayment/Reimbursement Complete ONLY if direct expenditure to benefit C/OH Date OFFice Sought Office sought Office held Office held Office held Office sought Office held Office held Office held Office held Date Opposite ONLY if direct expenditure to benefit C/OH Date Opposite Only if direct expenditure to benefit C/OH Date Opposite Only if direct expenditure to benefit C/OH Date Opposite Only if direct expenditure to benefit C/OH Abilene, TX 79606 Payee address; City; State; Zip Code S184.00 5550 Chimney Rock Rd Abilene, TX 79606 PURPOSE OF Chavez, Lupe Amount (\$) Payee address; City; State; Zip Code \$184.00 5550 Chimney Rock Rd Abilene, TX 79606 PURPOSE OF Chavez, Lupe Advertising Expense Office sought Office held	-					
Sibrey, Randy Sibrey, Rand	4	Date	5 Pavee name	_		
\$125.00 Saldile Lakes Abilene, TX 79602		06/19/2017				
B PURPOSE OF EXPENDITURE	6					
Salaries/Wages/Contract Labor			Abilene, TX 79602			
Date 06/30/2017 Payee name Briley, Robert	8	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Date 06/30/2017 Payee name Briley, Robert	9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold			
Date O6/99/2017 Amount (\$) Payee address; City; State; Zip Code Abillene, TX 79606 PURPOSE EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement Complete ONLY if direct expenditure to benefit C/OH Date O6/99/2017 Amount (\$) Payee name Chavez, Lupe Amount (\$) Payee address; City; State; Zip Code Payee name Chavez, Lupe Amount (\$) Payee address; City; State; Zip Code \$184.00 S184.00 S184.00 Candidate/Officeholder name of this schedule) Abillene, TX 79606 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense Complete ONLY if direct candidate/Officeholder name Office sought Office held Office held Office held	_					
Amount (\$)		Date	Payee name	_		
\$262.26 51 Fairway Oaks Blvd Abilene, TX 79606 PURPOSE OF Loan Repayment/Reimbursement Complete ONLY if direct expenditure to benefit C/OH Date 06/09/2017 Chavez, Lupe Amount (\$) Payee name Chavez, Lupe Amount (\$) Payee address; City; State; Zip Code \$184.00 5550 Chimney Rock Rd Abilene, TX 79606 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Chack if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Chack if Austin, TX, officeholder in Texas. Complete Schedule T. Chack if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complet		06/30/2017	Briley, Robert			
\$262.26 51 Fairway Oaks Blvd Abilene, TX 79606 PURPOSE OF Loan Repayment/Reimbursement Complete ONLY if direct expenditure to benefit C/OH Date 06/09/2017 Chavez, Lupe Amount (\$) Payee name Chavez, Lupe Amount (\$) Payee address; City; State; Zip Code \$184.00 5550 Chimney Rock Rd Abilene, TX 79606 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Chack if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Chack if Austin, TX, officeholder in Texas. Complete Schedule T. Chack if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complete Schedule T. Check if Austin, TX, officeholder in Texas. Complet		Amount (\$)	Payee address; City; State; Zip Code	_		
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PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held		` '				
OF EXPENDITURE Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held		:	Abilene, TX 79606			
		OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

		EVENINE ATTERDED FOR DOVAL	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		t & Related Expense
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 3/5 Rpt: 9/13	Briley, Robert	
4	Date 06/09/2017	5 Payee name Extreme Media	
6	Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 209 S. Danville Dr. Abilene, TX 79605	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule in Check if Austin, TX, officeholder living expense Radio advertising	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	06/14/2017	First Financial Bank	
	Amount (\$) \$6.00	Payee address; City; State; Zip Code PO Box 701 Abilene, TX 79604	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Sch Check if Austin, TX, officeholder living expense	
_	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	06/19/2017	Henderson, Chris	
	Amount (\$) \$165.00	Payee address; City; State; Zip Code 30 Queen Anns Lace	
		Abilene, TX 79606	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Sch Check if Austin, TX, officeholder living expense Contract labor - signs	
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expe Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule F1:	In EUED MANA		explains now to	-unhi	ete tilis form.	I_	Eller ID	
Sch: 4/5 Rpt: 10/13	Briley, Rob					3	Filer ID	
4 Date	5 Payee name							
06/19/2017	Hoffman, E							
6 Amount (\$) \$330.00	7 Payee addre 3933 Inver Abilene, TX	rary Dr	State; Zip (Code				
8 PURPOSE OF EXPENDITURE	(a) Category (s	See Categories listed at the top ages/Contract Labor		(b)		, TX,	le of Texas. Complete Schedule T. officeholder living expense Signs	
Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so	ught			Office held	
Date	Payee name)						
06/30/2017	KYYW-AM						104 275	
Amount (\$) \$100.00	Payee addre	n 1st	State; Zip C	Code				
PURPOSE OF EXPENDITURE	Abilene, TX (a) Category (s Advertising	see Categories listed at the top	of this schedule)	(b)		, TX,	ie of Texas. Complete Schedule T. Officeholder living expense	
Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so	ught			Office held	
Date 06/19/2017	Payee name Proforma P	romotions Group					>	
Amount (\$) \$169.97	Payee addre	08	State; Zip C	ode				
PURPOSE			60 300 754 - Etw	/I=>	Description			
OF EXPENDITURE	(a) Category (s Advertising	ee Categories listed at the top Expense	of this schedule)	(D)		, TX,	e of Texas. Complete Schedule T. Officeholder living expense ames	
Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office so	ught			Office held	
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POLITICAL EXPENDITURES FROM POLITICAL

	CONTRIBUTIO	NS		i i OLi		_		SCHEDULI	E F1
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	EXPENDITURE Event Expense Fees Fees Git/Awards/Memorials E Legal Services The Instruction Gui	xpense	Loan Repa Office Over Polling Exp Printing Ex Salarles/W	yment/Reimbursemer rhead/Rental Expensi ense pense pense ages/Contract Labor	е Т Т Т	Solicitation/Fundraising Expense Fransportation Equipment & Related E Fravel in District Fravel Out of District DTHER (enter a category not listed ab	·
1	Total pages Schedule F1: Sch: 5/5 Rpt: 11/13	2 FILER NAMI Briley, Rob					3 F	Filer ID	
4	Date 06/14/2017	5 Payee name Zachry Ass							
6	Amount (\$) \$67,436.11	7 Payee addre PO Box 17 Abilene, TX	ss; City; 39	State;	Zip Co	de			
8	PURPOSE OF EXPENDITURE	(a) Category (s Advertising	ee Categories listed at the Expense	top of this sche	edule)	Check if Au	istin, TX, of	of Texas. Complete Schedule T. Miceholder living expense paper, Social Media	
9	Complete ONLY if direct expenditure to benefit C/O		ceholder name	0	ffice soug	jht		Office held	
						W			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Event Expense Food/Beverage Expense Git/Awards/Memorials Expense Travel Out of District Candidate/Officeholder/Political Committee Credit Card Payment Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 1/1 Rpt: 12/13 Briley, Robert 4 Date Payee name 06/17/2017 **Market Street** Amount (\$) Payee address; City; State; Zip Code 4450 Buffalo Gap Rd \$832.27 Reimbursement from political contributions intended Abilene, TX 79606 PURPOSE Check if travel outside of Texas. Complete Schedule T. (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense EXPENDITURE Food- Election Night Event Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH

/	1, 64.00 () 1 - 40 (FORM C/OH - FR
	The Instruction Guide explains how to complete this form. ** Complete only if "Report Type" on page 1 is marked "Final Report" **	* Page 13 of 13
1	C/OH NAME	2 Filer ID
	Briley, Robert	cs@bhitx.net
3	SIGNATURE	
	I do not expect any further political contributions or political expenditures in connection with my as a final report terminates my campaign treasurer appointment. I also understand that I may no campaign expenditures without a campaign treasurer appointment on file.	
	Signature	of Candidate / Officeholder
4	FILER WHO IS NOT AN OFFICEHOLDER	
	** Complete A & B below only if you are not an officeholder **	
	A CAMPAIGN FUNDS	
	Check only one:	
9	X I do not have unexpended contributions or unexpended interest or income earned from	political contributions.
	I have unexpended contributions or unexpended interest or income earned from politic convert unexpended political contributions or unexpended interest or income earned or understand that I must file an annual report of unexpended contributions and that I may unexpended interest or income earned on political contributions longer than six years a must dispose of unexpended political contributions and unexpended interest or income	n political contributions to personal use. I also y not retain unexpended contributions or ufter filing this report. Further, I understand that I
	with the requirements of Election Code 254.204. B ASSETS	
	Check only one:	
	I do not retain assets purchased with political contributions or interest or other income t	
	I do retain assets purchased with political contributions or interest or other income from convert assets purchased with political contributions or interest or other income from pu understand that I must dispose of assets purchased with political contributions in accor 254.204.	olitical contributions to personal use. I also
	Robert O.	Bil
	Sig	nature of Candidate
5	OFFICEHOLDER	
	** Complete this section only if you are an officeholder **	
	I am aware that I remain subject to filing requirements applicable to an officeholder who also aware that I will be required to file reports of unexpended contributions if, after filin retain political contributions, interest or other income from politicial contributions, or assinterest or other income from political contributions.	g the last required report as an officeholder, I
	Sign	nature of Officeholder